

STATEMENT OF ECONOMIC INTERESTS Date Initial Filing Received

COVER PAGE

Please type or print in ink.

17 MOV -2 AM 8:22

NAME OF FILER	(LAST)		(FIRST)		(MIDDLE)
Chiang			John		
1. Office, Agency,	or Court				
Agency Name (Do no	ot use acronyms)				
State Treasurer's	s Office				
Division, Board, Depa	rtment, District, if applicable		Your Position		
			Treasurer	•	
► If filing for multiple	positions, list below or on an attachmen	t. (Do not use	acronyms)		
Agency: See Attac	ched		Position: Bo	pard Member	
2. Jurisdiction of	Office (Check at least one box)		•		
			☐ Judge or Co	ourt Commissioner (St	atewide Jurisdiction)
☐ Multi-County			County of _		· · · · · · · · · · · · · · · · · · ·
•	:				
3 Type of Statem	ent (Check at least one box)			·	
Annual: The pe	riod covered is January 1, 2016, through		Leaving O	ffice: Date Left	
-or-	per 31, 2016. riod covered is/	, through		<i>,</i> riod covered is Janua	ry 1, 2016, through the date of
Decemi	per 31, 2016.		leaving	office.	
Assuming Office	: Date assumed/		○ The pe	riod covered is e of leaving office.	/, through
Candidate: Elec	tion year and of	fice sought, if d	lifferent than Part 1:		
4. Schedule Sumr	mary (must complete) > Tot	tal number o	of pages includ	ing this cover pa	00:
Schedules att					•
Schedule A-	1 - Investments - schedule attached	×	Schedule C - Inco	me. Loans. & Busines	ss Positions - schedule attached
Schedule A-	2 - Investments - schedule attached	×		me – Gifts – schedule	
Schedule B	Real Property - schedule attached	X	Schedule E - Inco	me – Gifts – Travel P	ayments - schedule attached
-or-					
☐ None - No re	portable interests on any schedul	le	ng maj ay (garta yanan mada manananan a y carar y karabar-kara di Si dipindiy dan gar	rendelescopi legyel fol er jell slæm skrempelete (grensyske fall bendeles skrive) i brede	The second of th
5. Verification					•
MAILING ADDRESS (Business or Agency Addre	STREET ss Recommended - Public Document)	CITY		STATE	ZIP CODE
	treet, Suite 8500	Los Ang	eles	CA	90013
DAYTIME TELEPHONE NU			E-MAIL ADDRESS		
(213) 620-44	67				
	nable diligence in preparing this statemen ached schedules is true and complete. I				nowledge the information contained
l certify under penal	ty of perjury under the laws of the Sta	ate of Californi	ia that the foregoin	g is true and correct	
Date Signed	very ber 1,247	Sie	gnature / //A	n Mus,	·
	(month, day, year)			(File the originally signed staten	nent with your filing official.)
. /					FPPC Form 700 (2016/2017)

State Treasurer John Chiang

Filing of SEI Form 700
Original must be signed and dated and filed with the Fair Political Practices Commission
428 J Street, Suite 620
Sacrament, CA 95814

Copies to the Following

For all STO BCA's

Brittney Trost - Admin STO, Room 538

CaIPERS

(CalPERS)Attn: Tifani Vincent, FPPC Filing Officer 400 Q Street, LPN - Sacramento, CA 95811 Enterprise Compliance office

CalSTRS

Attn: Amanda Connors, FPPC Filing Officer 100 Waterfront Place West Sacramento, CA 95851-0275

CalHFA

Attn: Misty Miller, FPPC Filing Officer 500 Capitol Mall # 1400 Sacramento, CA 95814

California Earthquake Authority (CEA)

Attn: Neil Hall, FPPC Filing Officer
801 K Street, Suite 1000
Sacramento, CA 95814

California Infrastructure and Economic Development Bank (IBANK)

Attn: Nancee Trombley, FPPC Filing Officer 1325 J Street, 18th Floor Sacramento CA 95814

Commission on State Mandates

Attn: Jill Magee, FPPC Filing Officer 980 Ninth Street, Suite 300 Sacramento, CA 95814

Golden State Tobacco Securitization Corporation California Economic Recovery Financing Committee Golden State Transportation Financing Corporation State Public Works Board

California Department of Finance Attn: Jeanna Wimberly, FPPC Filing Officer 915 L Street 12th Floor Sacramento, CA 95814 State Treasurer John Chiang

CA Competes Tax Credit Committee Attn: Virginia Gutierrez 1325 J Street, Suite 1800 Sacramento, CA 95814 (916)322-0659

SCHEDULE A-1 Investments

Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CAL	IFORN	A FOI	SM.	70	0
	OLITICAL				
Name)				

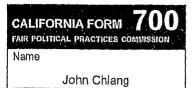
John Chiang

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Dunn Edwards*	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Paint	
	PAID LADIET MALLE
FAIR MARKET VALUE	FAIR MARKET VALUE
※ \$2,000 - \$10,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Dver \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATION OF INVESTAGES	MATURE OF INDEPOSITOR
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
<u>//_16</u>	/ / 16 / 16
ACQUIRED DISPOSED	ACQUIRED DISPOSED
► NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
· ·	
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
	CENTER OF SECOND (1811 OF THE ECONOMICS
The second secon	**************************************
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
S100,001 - \$1,000,000 Over \$1,000,000	S100,001 - \$1,000,000 Over \$1,000,000
MARILINE OF MARIE CONT. LEADER	
NATURE OF INVESTMENT Stock Other	NATURE OF INVESTMENT
Stock Other (Describe)	Stock Other (Describe)
Partnership O Income Received of \$0 - \$499	Partnership O income Received of \$0 - \$499
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE;
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
MANUE OF BUGINESS ENTITY	MAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,001 - \$100,000
\$100,001 - \$1,000,000 Qver \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
[] \$100,001 - \$1,000,000	[
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	Stock Other
(Describe)	· (Describe)
Partnership O income Received of \$0 - \$499	Partnership O Income Received of \$0 - \$499.
O Income Received of \$500 or More (Report on Schedule C)	O Income Received of \$500 or More (Report on Schedule C)
IS ADDUCABLE VIOL DATE:	IF APPLICABLE, LIST DATE:
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 16/_ / 16	/ / 16 / / 16
ACQUIRED DISPOSED	ACQUIRED DISPOSED
·	l
*Spouse ESOP	

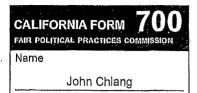
SCHEDULE C Income, Loans, & Business Positions (Other than Gifts and Travel Payments)

CALIFORNIA FOR	
Name	
John Chi	ana

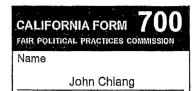
	► 1, INCOME RECEIVED
NAME OF SOURCE OF INCOME	NAME OF SOURCE OF INCOME
Position Match, LLC	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
140 S. Crescent Drive	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Focus Group	
YOUR BUSINESS POSITION	YOUR BUSINESS POSITION
None	
GROSS INCOME RECEIVED No Income - Business Position Only	GROSS INCOME RECEIVED No Income - Business Position On
▼ \$500 - \$1,000	\$1,001 - \$10,000
\$10,001 - \$100,000OVER \$100,000	S10,001 - \$100,000 OVER \$100,000
CONSIDERATION FOR WHICH INCOME WAS RECEIVED	CONSIDERATION FOR WHICH INCOME WAS RECEIVED
Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)	Salary Spouse's or registered domestic partner's income (For self-employed use Schedule A-2.)
Partnership (Less than 10% ownership. For 10% or greater use Schedule A-2.)	Partnership (Less than 10% ownership, For 10% or greater use Schedule A-2,)
Sale of	Sale of
(Real property, car, boal, etc.) Loan repayment	(Real property, car, boat, etc.)
Commission or Rental Income, list each source of \$10,000 or more	Commission or Rental Income, list each source of \$10,000 or more
and the second s	11
(Describe)	(Describe)
(Describe)	(Describe)
(Describe)	(Describe)
Other	Other (Describe)
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the second control of the second co	Control (Describe) I lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's
* You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official.	Control (Describe) I lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folionated or Lender*	Other (Describe) I lending institutions, or any indebtedness created as part of the lender's regular course of business on terms available to status. Personal loans and loans received not in a lender's ows:
other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folions.	Other
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folionated to the public without regard to your official regular course of business must be disclosed as folionated to the public without regard to your official regular course of business must be disclosed as folionated to the public without regard to your official regular course of business Address Acceptable)	Other
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folionated or Lender*	Other
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folionated to the public without regard to your official regular course of business must be disclosed as folionated to the public without regard to your official regular course of business must be disclosed as folionated to the public without regard to your official regular course of business Address Acceptable)	Other
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folionated to the public without regard to your official regular course of business must be disclosed as folionated to the public without regard to your official regular course of business must be disclosed as folionated to the public without regard to your official regular course of business Address Acceptable)	Other
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folionable of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER	Other
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as followed as followed by the public of the public without regard to your official regular course of business must be disclosed as followed by the public of the public without regard to your official regular course of business must be disclosed as followed by the public of	Other
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folionable of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	Other
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folionable of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000 \$10,001 - \$10,000	Other
Other (Describe) 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING P * You are not required to report loans from commercial retail installment or credit card transaction, made in the members of the public without regard to your official regular course of business must be disclosed as folionable of Lender* ADDRESS (Business Address Acceptable) BUSINESS ACTIVITY, IF ANY, OF LENDER HIGHEST BALANCE DURING REPORTING PERIOD \$500 - \$1,000	Other



► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)			
Wang Jiaqi/No.180PenyuzhanMaoE.St.HuaLongTon	League of California Cities			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
Panyu District Guanzhou, Guangdoing Province PRC	1400 K Street #400 Sacramento CA 95814			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Commodity Training	Local Government			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
01,09,16 _{\$} 8.00 Tea	01,20,16 \$4.33 APICaucusReception			
01 , 09 , 16 _{\$} 200.00 Mou Tai (Liquor)	02 , 25 , 16			
	06,18,16			
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)			
Christine Young	Los Angeles County Federation of Labor			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
433 Airport Blvd. #330 Burlingame CA 94010	2130 James M, Wood Blvd. Los Angeles CA 90006			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Insurance	Labor			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
01 , 22 , 16 _{\$} 70.00 Lunch	01 , 23 , 16			
	/sBreakfast			
	\$			
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Aaronym)			
Consulate General of Canada	LA County Asian American Employees Association			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
550 S. Hope Street Los Angeles CA 90071	PO Box 86334 Los Angeles CA 90086			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Diplomatic relations	Professional organization			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
01 , 25 , 16	01,28,16 _{\$} 35.00 Dinner			
VerdeXchange 2016	01,28,16 \$20.00 Pen			
	\$			
Comments:				



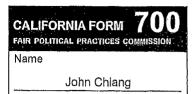
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
SAG-AFTRA ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
350 Sansome St. #900 San Francisco CA 94104	Translad (addition flations flation)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Labor	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
01,30,16 \$199.00 Awards Show	\$
01 , 30 , 16 _{\$} 122.82 Awards Gala	-//
	\$
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
/ / \$	
	\$
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
·	\$
	\$
	\$
Comments:	



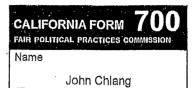
► NAME OF SOURCE	CE (Not an Acronyo	ni		AME OF SOURCE	≣ (Not an Acronyi	741	
SEIU Internal			11	Caroline Cho		ng .	
ADDRESS (Business Address Acceptable) 1800 Massachusetts Ave. NW Washington, DC 20036 BUSINESS ACTIVITY, IF ANY, OF SOURCE			11	ADDRESS (Business Address Acceptable) 1111 S. Grand PH5 Los Angeles CA 90015 BUSINESS ACTIVITY, IF ANY, OF SOURCE			
			1 1				
			11				
labor		·	11	nvestments	I' II. VIAT' OI. O	JUNUE .	
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(8)	11 -	ATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
DATE (IIIIIIIda/yy)	VALUE			VIE (Initiadolada)	WEGE	PESCULLION OF GILI(S)	
02 , 01 , 16	_{\$} 73.00	Reception		02 , 05 , 16	\$ 60.00	Dinner	
		·					
	\$		-	/	\$	•	
					•	•	
	\$		-		\$		
NAME OF SOURCE	E (Not an Acronyn	n)	► N	AME OF SOURCE	(Not an Acronyi	m)	
Wei Huang				California Der	nocratic Part	y .	
ADDRESS (Busine	ss Address Accept	able)	Αſ	DDRESS (Busines	s Address Accept	table)	
333 S. Figuer	roa Street Los	Angeles CA 90071	. 1 1	830 9th Stre	et Sacramen	to CA 95811	
BUSINESS ACTIVI	TY, IF ANY, OF SC	DURCE	BI	JSINESS ACTIVIT	Y, IF ANY, OF S	OURCE	
Real Estate D	Development		F	Politics ,		• •	
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	0/	ATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
02,07,16	\$ 200.00	Bottle of Wine		02 , 09 , 16	\$ 119.10	AssemblyDemCaucus	
	\$	·	_		\$	Reception & Dinner	
				•			
	\$,	-		\$	· · · · · · · · · · · · · · · · · · ·	
► NAME OF SOURC	E (Not an Acronym	1)	▶ N	AME OF SOURCE	: (Not an Acronyi	m) .	
Chinese Con:	sulate of Los	Angeles	L	os Angeles (County Black	Probation Officers Assoc.	
ADDRESS (Busine					s Address Accep		
443 Shatto Pl	lace Lso Ange	eles CA 90020	F	O Box 8805	Los Angeles	CA 90008	
BUSINESS ACTIVI	TY, IF ANY, OF SC	OURCE .	BU	JSINESS ACTIVIT	Y, IF ANY, OF S	OURGE .	
Diplomatic Re	elations	· · · · · · · · · · · · · · · · · · ·	L	aw enforcen	ent	•	
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	D/	ATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
02,14,16	_{\$} 20.00	Amb.Liu Dinner] _0	02 , 19 , 16	_{\$} 50.00	Luncheon	
08,20,16	_{\$} 20,.00	Post-ChinaTrlpDinner			\$		
09,30,16	\$ 20.00	NationalDayReception			\$		
Comments:							
	•						



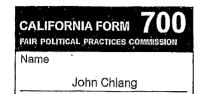
► NAME OF SOURCE	= /Not an Acronym	1	► NAME OF SOURCE	= (Not an Acronym)	<u> </u>							
			11									
Valley Industry & Commerce Association ADDRESS (Business Address Acceptable) 16600 Sherman Way #170, Van Nuys, CA 91406 BUSINESS ACTIVITY, IF ANY, OF SOURCE			Hong Kong Association of Southern California ADDRESS (Business Address Acceptable) 350 S. Figueroa St. #139, Los Angeles, CA 90071 BUSINESS ACTIVITY, IF ANY, OF SOURCE									
							Advocacy	1, 11 7,001, 37 33		Global Relation		
							DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
DATE (IIIIIIIIIII)	•	bedokii flori di dii itoj	DATE (mindary)	V/12.012	DESCRIPTION OF OUR INDI							
02,19,16	\$ 150.00	Annual State	02,20,16	\$ 100,00	Chinese New Year							
	\$	Officeholders Dinner		\$	Gala							
<u> </u>	\$			\$								
► NAME OF SOURCE	E (Not an Acronym,)	► NAME OF SOURCE	E (Not an Acronym)								
CA Asian Pac	ific Chamber	of Commerce			•							
ADDRESS (Busines	s Address Accepta	ble)	ADDRESS (Busines	s Address Accepta	ble)							
2012 H Street	, Suite 101, \$	acramento, CA 95811										
BUSINESS ACTIVIT	TY, IF ANY, OF SO	URCE	BUSINESS ACTIVIT	TY, IF ANY, OF SOL	URĆE							
Business			11 .		•							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE .	DESCRIPTION OF GIFT(S)							
02 , 22 , 16	\$ 79.00	Asian Pacific Islander		\$	**************************************							
	\$	Legislative Caucus		\$								
	\$	Dinner		\$								
NAME OF SOURCE	E (Not an Acronym))	► NAME OF SOURCE	E (Not an Acronym,) · · · · · · · · · · · · · · · · · · ·							
	,											
ADDRESS (Busines	s Address Accepta	ble)	ADDRESS (Busines	ss Address Accepta	ble)							
BUSINESS ACTIVIT	ry, If ANY, OF SO	JRGE	BUSINESS ACTIVIT	ry, if any, of so	URCE							
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)							
	\$			\$								
	\$			6								
	\$			\$								
Comments:												



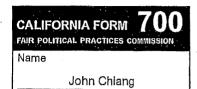
► NAME OF SOUR	CE (Not an Acronyr	m)		► NAME OF SOURCE (Not an Acronym)			
Jewish National Fund				Carmen Policy			
ADDRESS (Business Address Acceptable)				ADDRESS (Business Address Acceptable)			
42 East 69th Street, New York, NY 10021				PO Box 2252 Yountville, CA 94599			
BUSINESS ACTIV	ITY, IF ANY, OF SO	OURCE	.	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Non-profit org	ganization			Retired			
. DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
03,01,16	\$ <u>40.00</u>	Food/Drink-CA-Israel	.	03 , 03 , 16			
	\$	Water Summit	.	town Law Center Dear			
03 , 01 , 16	_{\$} 20.00	Book		Willam Treanor-Dinner			
► NAME OF SOURC	E (Not an Acronyn	n)		► NAME OF SOURCE (Not an Acronym)			
Detailed Mee				Cece Felleir			
ADDRESS (Busine			-	ADDRESS (Business Address Acceptable)			
		o Palos Verdes CA 90275		100 South The Grove Drive, Los Angeles, CA 90036			
	TY, IF ANY, OF SC	DURÇE		BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Event Plannir	ng			Non-profit organization			
DATE (mm/dd/yy)	VALUE .	DESCRIPTION OF GIFT(S)	ľ	DATE (mm/kld/yy) VALUE DESCRIPTION OF GIFT(S)			
03,10,16	\$ 65.46	ALTSA 2016		03 , 10 , 16			
	\$	Conference-Lunch					
	\$						
► NAME OF SOURC	E (Not an Acronym)		► NAME OF SOURCE (Not an Acronym)			
Stanford Insti	tute for Econd	mic Policy Research		Stanford Institute for Economic Policy Research			
ADDRESS (Busine	ss Address Accepte	ıble)	- 1	ADDRESS (Business Address Acceptable)			
356 Galvez S	treet, Stanford	d, CA 94305-6015		356 Galvez Street, Stanford, CA 94305-6015			
BUSINESS ACTIVI	TY, IF ANY, OF SO	URCE		BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Research				Research			
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	1	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
03,11,16	\$30.00	Summit-Breakfast		03 , 11 , 16 _{\$} 50.00 Reception			
03,11,16	\$ 48.00	Summit-Lunch		\$			
03 , 11 , 16	\$20.00	Summit-Drink		\$			
Comments:							
				•			



A COLOR	OF Alaban Annual		L WAR OF COURSE	- /Al / / /	
NAME OF SOURCE	JE (NOT AN ACTONYM)		NAME OF SOURCE		
Alan Thlan	4.44			·····	lopment Corporation
	ess Address Accepta		ADDRESS (Busines		
		an Gabriel, CA 91776	11		os Angeles, CA 90071
	ITY, IF ANY, OF SOL	JRGE	BUSINESS ACTIVIT	•	URCE
Banking	1444.05		Non-profit org		
DATE (mm/dd/yy)	VALÚE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 , 15 , 16	\$ 80.00	Welcome Dinner for	03,16,16	\$ 30.00	Board of Governors
	\$	Mayor of Tapei	05, 26, 16	_{\$} 64.80	Southern CA Leader-
	· \$			\$	ship Council-Lunch
► NAME OF SOURCE	E (Not an Acronym)	······································	► NAME OF SOURCE	(Not an Acronym)	J
Meyers Nave			Change to Wi		
	ss Address Acceptab	le)	ADDRESS (Busines		ble)
	et, Oakland, C				ngton, DC 30036
	TY, IF ANY, OF SOU		BUSINESS ACTIVIT		
Legal			Non-profit Lab		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03,18,16	\$350.00	AABA Installation	03,22,16	\$ <u>54.55</u>	Treasurers/Controllers
	\$	Dinner ·		\$	Lunch at CII
	\$			\$	
► NÂME OF SOURC	E (Not an Acronym)		► NAME OF SOURCE	: (Not an Agronym)	,
OGAM, Ltd.	E (NOT all Actollytis)		Indo-Americar		
	ss Address Acceptab	<i>l</i> o)	ADDRESS (Busines		de la companya del companya de la companya del companya de la comp
		oronto ON M5H Canada	719 Boar Circl		
	TY, IF ANY, OF SOU		BUSINESS ACTIVIT		
	IT IT ANT OF BOD	NOL	I i		nior.
Investments DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	Non-profit orga	VALUE	DESCRIPTION OF GIFT(S)
	75.00	Discourse	00 05 40	00.00	Liette - Dine
03,22,16	\$ 75.00	Dinner	03,25,16	\$ 80.00	Unity Dinner
	\$			\$,
	\$			\$	
•		, *			
Comments:					,



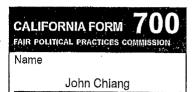
NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Agronym)
Asian Americans Advancing Justice	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1620 L St. NW Suite 1050 Washington, DC 20036	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit organization	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
03,30,16 \$69.00 National Conference-	\$
// \$ Welcome Reception	\$
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
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A HAND OF COURSE ALL A A MANAGEMENT	NAME OF COURSE AND THE STATE OF
► NAME OF SOURCE (Not an Acronym)	NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
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	\$
·	\$
Comments:	



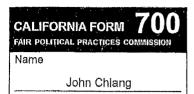
► NAME OF SOURCE (Not an Aeronym)	► NAME OF SOURCE (Not an Actonym)
Japanese American Bar Association	California State Council of Laborers
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
PO Box 71961 Los Angeles, CA 90071	1121 L Street, Sulte 502, Sacramento,CA 95814
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional Organization	Labor
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
04,03,16 \$65.00 Gala	04,04,16 s53.40 Open house reception
	\$
	\$
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
Royal Business Bank	Committee of 100
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
121 E. Valley Blvd. #101 San Gabriel, CA 91776	257 Park Ave. South, 19th Fl. New York, NY 10010
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Banking	Non-profit organization
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
04,06,16 \$75.00 Lunch	04 , 10 , 16
04,15,16 _{\$} 55.00 Lunch	04 , 16 , 16
	04 , 17 , 16
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
CA Municipal Treasurer's Association	Joe Tseng
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
700 R Street, Suite 200, Sacramento, CA 95811	150 N. Santa Anita Ave. #490 Arcadia, CA 91006
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Professional organization	Accounting
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
04 , 13 , 16	04,15,16 <u>\$114.75</u> Dinner
	\$
	\$
Comments:	

	ORNIA FORM TITICAL PRACTICES COMM	
Name		
	John Chiang	•

NAME OF SOURCE		•	NAME OF SOURCE	E (Not an Acronym)			
		dependent Business CA	Edward Cal ADDRESS (Business Address Acceptable)				
ADDRESS (Busine							
), Sacramento, CA 95814			West Covina, CA 91790		
BUSINESS ACTIVI	ITY, IF ANY, OF S	OURCE	BUSINESS ACTIVIT	TY, IF ANY, OF SOL	JRCE		
Advocacy			Exporter				
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		
04,19,16	\$ 63,84	Lobby day-Lunch	04,28,16	\$ 150.00	Dinner		
	\$,		· \$			
	\$			\$			
NAME OF SOURCE	E (Not an Acrony	m)	► NAME OF SOURCE	E (Not an Acronym)			
ADDRESS (Busine	ss Address Accep	otable)	ADDRESS (Busines	s Address Acceptal	ble)		
BUSINESS ACTIVI	TY, IF ANY, OF S	OURCE	BUSINESS ACTIVIT	TY, IF ANY, OF SOL	JRCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		
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سنبوهماويون أودوات القشام أستبط والتنظيم التنسير	Финализа			Ψ			
	\$			\$			
	\$			\$			
► NAME OF SOURC	E (Not an Acrony	m)	► NAME OF SOURCE	∃ (Not an Acronym)			
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·	\$			\$			
	\$- 			\$			
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Comments:					N=1.		



NAME OF SOURCE (No	ot an Acronym)			NAME OF SOURC	E (Not an Acronym)	
CTA Orange Serv	vice Center	Council	- []	Chinaweek		
ADDRESS (Business Address Acceptable)				ADDRESS (Business Address Acceptable)		
281 N. Rampart S	281 N. Rampart Street, Sulte A, Orange CA 92868			680 E. Colora	do Blvd. #180	Pasadena, CA 91101
BUSINESS ACTIVITY, IF			- 11	BUSINESS ACTIVIT		
Labor	·	,			vents Resourc	
	LUE	DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05,04,16 \$7	1.66	WHO Awards Banquet		05,11,16	ş 125.00	China Business
·					\$	Summit - Lunch
		· ·	.		\$	
➤ NAME OF SOURCE (No	t an Acronym)	· · · · · · · · · · · · · · · · · · ·	一,	NAME OF SOURCE	E (Not an Acronym)	
21st Century Fox				AJC Los Ange	eles	
ADDRESS (Business Add	dress Acceptable			ADDRESS (Busines	******************************	le)
2121 Avenueofthe	Stars #700	Los Angeles, CA 90067		11766 Wilshir	e Blvd. Los An	geles, CA 90012
BUSINESS ACTIVITY, IF		the state of the s		BUSINESS ACTIVIT		and the second s
Entertainment		•		Non-profit org	anization	
DATE (mm/dd/yy) VAL	.UE	DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05,16,16 \$1	5,88	APIHM Screening		05 , 23 , 16	\$ 100.00	Annual Meeting
05,16,16 \$7	6.06	APIHM Reception			\$	
	-				\$	
NAME OF SOURCE (Not	t an Acronym)		□	NAME OF SOURCE	(Not an Acronym)	
Talwan American	Chamber of	Greater Los Angeles	- 11			
ADDRESS (Business Add		····	- .	ADDRESS (Busines	s Address Acceptab	le)
1045 E, Valley Blv	/d, #A211 Sa	ın Gabriel, CA 91776			•	
BUSINESS ACTIVITY, IF			H	BUSINESS ACTIVIT	Y, IF ANY, OF SOU	RCE
Business	,					
DATE (mm/dd/yy) VAL,	UE	DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
05,28,16 \$62	2.00	Investment			\$	
		Conference-Lunch			\$	
\$					\$	******
Commonto						•
Comments:		THE CONTRACT OF THE CONTRACT O		· · · · · · · · · · · · · · · · · · ·		<u> </u>

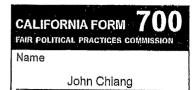


► NAME OF SOURGE (Not an Acronym)	NAME OF SOURCE (N	ot an Acronym)		
Asian American Association of Investment Managers	Chinese Community Affairs Council			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
50 California St. #2320 San Francisco, CA 94111	715 S. Lincoln, M	lonterey Park, C	A 91755	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF	ANY, OF SOURCE		
Non-profit organization	Non-profit organi	zation		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VA	LUE DES	CRIPTION OF GIFT(S)	
06,02,16 \$40.00 Conference-Breakfast	06,16,16	50.00 Priv	vate Dinner	
06 , 02 , 16	<u> </u>	<u> </u>		
	\$\$	· ·	-	
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (No	ot an Acronym)		
Association for Los Angeles Deputy Sheriffs	Taipel Economic	and Cultural Offi	ce in Los Angeles	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Ad	dress Acceptable)		
2 Cupania Circle Monterey Park, CA 91755	3731 Wilshire Bl.	#700 Los Angelo	es, CA 90010	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
Law Enforcement	Diplomatic Relation	ons		
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VA	LUE DESC	CRIPTION OF GIFT(S)	
06 , 18 , 16 \$ 73.00 Awards Banquet	06,30,16 \$5	50.00 Tal	wan Pres. Arrival-	
	\$\$	Giff		
	07,01,16 \$4	10.00 Bre	eakfast Meeting	
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (No	ot an Acronym)		
Taipei Economic and Cultural Office in Los Angeles				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Ad	dress Acceptable)		
3731 Wilshire Bl. #700 Los Angeles, CA 90010				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF	ANY, OF SOURCE		
Diplomatic Relations				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VAI	LUE DESC	ORIPTION OF GIFT(S)	
12 , 13 , 16	\$\$			
12 , 13 , 16 _{\$} 15.00 Wine	\$			
	\$\$			
Comments:				

► NAME OF SOURCE	(Not an Acronym)		► NAME	OF COURCE	E (Not an Acronym)			
Gen Next, Inc.	(Ivot bii Maionyii)		4 1					
ADDRESS (Business Address Acceptable) 4100 MacArthur Bl. #325, Newport Beach, CA 92660			1 1	Katherine Spillar ADDRESS (Business Address Acceptable)				
			1 1			ngton, VA 22209		
BUSINESS ACTIVITY					TY, IF ANY, OF SOL			
Professional O	•	\ .	07		11, 11 7117, 01 001	,		
	VALUE	DESCRIPTION OF GIFT(S)		(mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		
07 , 13 , 16	\$ 87.77	Evening Reception	07	15 16	\$ 284.00	Hollywood Bowl		
	\$				\$			
	\$	and the second s			\$	***************************************		
NAME OF SOURCE	(Not an Acronym)		► NAME	OF SOURCE	E (Not an Acronym)			
ADDRESS (Business	Address Acceptable	3)	ADDR	ESS (Busines	s Address Acceptat	ole)		
BUSINESS ACTIVITY	, IF ANY, OF SOUR	ROE	BUSIN	IESS ACTIVIT	Y, IF ANY, OF SOL	JRCE		
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DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE	(mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		
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	\$				·\$			
	\$			J_ <u>·</u>	\$			
NAME OF SOURCE	(Not an Acronym)		► NAME	OF SOURCE	(Not an Acronym)			
ADDRESS (Business	Address Acceptable)	ADDRE	ESS (Busines	s Address Acceptab	le)		
BUSINESS ACTIVITY,	IF ANY, OF SOUR	СĘ	BUSIN	ESS ACTIVIT	Y, IF ANY, OF SOU	RCE		
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE	(mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		
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	5	-			\$			
	·				\$			
Comments:	-							



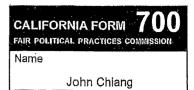
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)				
LE Holdings (Beljing) Co. Ltd.	MEBO International Group				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)				
3rdLayerHongChengXinTalBldgYaojlayuanRdChao	F31BldgAtheApacesInt'lCtr8DongdaqiaoStCha	iovana			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE				
yangDistBeijingPRChina100025 Electronic Manufac	DistBeijingPRChina Medical Manufacturing				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIF	FT(S)			
	,	,,,-,			
07 , 31 , 16 _{\$} 50.00 Meal	08,01,16 _{\$} 65.00 Lunch				
	/\$				
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)	1-11-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1			
Department of Commerce, Shanxi Province	ShanxiProvincialPeople'sAssocforFriendshipwi	For-			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)				
1 Xinjian Road, Talyuan, Shanxi, China 030002	eignCountries-Int'lBldgNo388YingzeSt#2201Ti	ayan			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE	***************************************			
Foreign Gov't Assn	ShanxiChina030002 ForeIgn Gov't Assn				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIF	T(S)			
08 , 03 , 16 \$50.00 TourMuseumThermal	08 , 03 , 16 _{\$} 55.00 LunchDinnerTou	ır			
PlantLunchDinnerGift					
\$	08 , 04 , 16	nner			
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)				
Jiangsu Provincial People's Government	Vice Governor Lei Zhang, Jiang Su Province	•			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)	***************************************			
68 W Belling Road, Nanling, China 210024	68 W Beljing Road, Nanjing, China 210024	*			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE				
Foreign Government Association	Government				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(\$)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIF	T(S)			
08 , 05 , 16 _{\$} 55.00 Lunch	08 , 05 , 16				
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Comments:	22.				



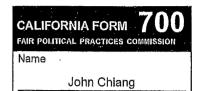
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JiangsuProvi	incialPeople's	AssnforFrlendshipwFor-			·
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elanCountrie	s 15 Xikang F	Rd., Nanjing, China		•	•
BUSINESS ACTIV			BUSINESS ACTIVI	TY, IF ANY, OF SO	DURCE
	ernment Asso			, 11 11 111111 -1 4	- 0 / (0) m
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
•			27.12 (1.11.11.12.17)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	bedomin flori or all flor
08 , 05 , 16	_{\$} 60.00	Dinner	_	\$	
	00.00	o i e			. :
	_{\$} 66.00	Gift	-	\$	
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	\$	 	-	\$	·
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IAME OF SOURC	E (Not an Acronym	יי	► NAME OF SOURCE	E (Not an Acronyn	7)
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DDRESS (Busines	ss Address Accepte	nble)	ADDRESS (Busines	s Address Accept	able)
		·	.		
USINESS ACTIVIT	TY, IF ANY, OF SO	URCE	BUSINESS ACTIVIT	ry, if any, of so	OURCE
ATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
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	\$			\$	
	\$			\$	
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	\$	*	/	\$	
omments:					



09 , 01 , 16	OTION OF GIFT(S)
ADDRESS (Business Address Acceptable) 8530 Stanton Avenue #2A Buena Park, CA 90620 BUSINESS ACTIVITY, IF ANY, OF SOURCE Labor DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 09 , 01 , 16	OTION OF GIFT(S)
ADDRESS (Business Address Acceptable) 8530 Stanton Avenue #2A Buena Park, CA 90620 BUSINESS ACTIVITY, IF ANY, OF SOURCE Labor DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 09 , 01 , 16	TION OF GIFT(S)
8530 Stanton Avenue #2A Buena Park, CA 90620 BUSINESS ACTIVITY, IF ANY, OF SOURCE Labor DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 09 , 01 , 16	TION OF GIFT(S)
BUSINESS ACTIVITY, IF ANY, OF SOURCE Labor DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 09 , 01 , 16	TION OF GIFT(S)
Labor Business Community DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 09 , 01 , 16	· u
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 09 , 01 , 16	· u
► NAME OF SOURCE (Not an Acronym) ► NAME OF SOURCE (Not an Acronym)	
ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIP	TION OF GIFT(S)
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► NAME OF SOURCE (Not an Acronym) ► NAME OF SOURCE (Not an Acronym)	
ADDRESS (Business Address Acceptable) ADDRESS (Business Address Acceptable)	
BUSINESS ACTIVITY, IF ANY, OF SOURCE BUSINESS ACTIVITY, IF ANY, OF SOURCE	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) DATE (mm/dd/yy) VALUE DESCRIP	PTION OF GIFT(S)
	····
Comments:	



► NAME OF SOURC	•	the state of the s		► NAME OF SOURCE	E (Not an Acroi	ıym)	
Allied Pacific IPA & Network management ADDRESS (Business Address Acceptable)				UNAC/UHCP ADDRESS (Business Address Acceptable)			
1668 S, Garfi	eld Ave. 2nd F	I. Alhambra, CA 91801	Ш	955 Overland	Ct. #150 S	an Dimas CA 91773	
BUSINESS ACTIVI	TY, IF ANY, OF SOL	URGE	Ш	BUSINESS ACTIVIT	Y, IF ANY, OF	SOURCE	
Medical				Labor			
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy)	VÁLUÉ	DESCRIPTION OF GIFT(S)	
10,01,16	\$ 80.00	Annual Retreat		<u>10 , 03 , 16</u>	\$ 230.00	Convention-Reception	
12,11,16	\$ 150.00	Holiday Party			\$		
	. \$	patricular de la constitución de			\$		
► NAME OF SOURCE	E (Not an Acronym)		\dashv	► NAME OF SOURCE	: (Not an Acroi	nvm)	
ArmenianNat'	Committeeof	America-WesternRegion	Ш		. ,	hen & Associates	
ADDRESS (Busines		·····		ADDRESS (Busines		Troub. I control control fragment to the control of	
104 North Bel	mont St. #200	Glendale, CA 91206		790 E. Colora	do Bl. #260	Pasadena, CA 91101	
BUSINESS ACTIVIT	TY, IF ANY, OF SOL	JRCE		BUSINESS ACTIVIT		·	
Advocacy		•	11	Legal			
DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
10,16,16	\$96.00	Annual Banquet		10,20,16	\$ 20.00	Reception	
	\$.	10,20,16	\$ 25.00	Journal	
	\$			10,20,16	_{\$} 15.00	Pen	
► NAME OF SOURCE	= (Alot an Acronym)		$\dashv I$	► NAME OF SOURCE	Mot an Acros	ntern)	
		Prosecutors Association	Ш	Christian Burg	•	ymy	
ADDRESS (Busines			- 11	ADDRESS (Busines		entable)	
•	•	ng, San Jose, CA 95110				Suite 900 Irvine, CA 92612	
BUSINESS ACTIVIT				BUSINESS ACTIVIT			
Professional C			П	Legal	,, ,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
DATE (mm/dd/yy)	VÁLUE	DESCRIPTION OF GIFT(S)		DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)	
10,21,16	<u>\$ 110.00</u>	Scholarship Banquet		10 , 29 , 16	\$80.00	City Club Los Angeles	
	\$				\$	Charity Masquerade	
	\$ <u></u>				\$	Ball	
	•						
Comments:		,		· · · · · · · · · · · · · · · · · · ·			



► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)				
State Bar of California - International Law Section	Asian Business Association				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable) 120 S. San Pedro St. #523 Los Angeles, CA 90012 BUSINESS ACTIVITY, IF ANY, OF SOURCE				
180 Howard Street, San Francisco, CA 94105					
BUSINESS ACTIVITY, IF ANY, OF SOURCE					
Legal	Advocacy				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)				
11 , 04 , 16	11 , 14 , 16 \$85.00				
	\$				
<u> </u>	\$				
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Aoronym)				
Anschutz Entertainment Group (AEG)	USC Sol Price of Public Policy				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)				
800 W. Olympic Blvd. #305 Los Angeles, CA 90015	USC, Lewis Hall 312, Los Angeles, CA 90089-0620				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE				
Entertainment	Policy				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)				
11 , 14 , 16 _{\$} 55.00 Food - Clippers Game	11 , 16 , 16 _{\$} 50.00 Dean's Policy				
	Breakfast Series				
	\$				
► NAME OF SOURCE (Not an Acronym)	▶ NAME OF SOURCE (Not an Acronym)				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)				
\$	\$				
	\$				
	\$				
Comments:					

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Name

John Chlang

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
California School Boards _r Association	Sacramento Seminar c/o Richard Spotswood
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
3251 Beacon Blvd, West Sacramento,CA 95691	200 Magee Avenue, Mill Valley, CA 94941
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit organization	Political to Civic Discussions
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
12 , 02 , 16	12,02,16 _{\$} 50.00 Lunch
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
Korean Resource Center	San Francisco & Construction Trades Council
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
900 Crenshaw Boulevard, Los Angeles, CA 90019	1188 Franklin St. #9203 San Francisco, CA 94109
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit organization	Labor
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
12 , 08 , 16 \$55.50 Board Luncheon	12 , 09 , 16
	\$
\$	\$
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURGE (Not an Acronym)
Hotel California by the Sea, LLC	KHEIR
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
2811 VIIIa Way, Newport Beach, CA 92663	3727 W. 6th St. Suite 210, Los Angeles, CA 90020
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Treatment	Non-profit organization
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
12 , 13 , 16	12 , 14 , 16 \$55.00 Board Appreciation
\$	12 , 14 , 16 _{\$} 30.00 Gift
Comments:	
	•

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
CREED LA	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
501 Shatto Pl. #200, Los Angeles, CA 90020-1713	
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
Non-profit organization	
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
12 , 15 , 16 _{\$} 58.98 Hollday Party	· \$
	\$
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)
· \$	· \$
<u></u>	\$
	\$
▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(8)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(8)
**************************************	\$
Comments:	
· .	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
John Chiang

 Mark either the gift 	or income box	
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- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

▶ NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
CERES	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
99 Chauncy Street, 6th Floor	
CITY AND STATE	CITY AND STATE
Boston, MA 02111	
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 01,26,16 01,27,16 AMT: \$285.00	DATE(S):/
▶ MUST CHECK ONE: X Gift -or- Income	MUST CHECK ONE: Gift -or- Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
O Other - Provide Description "Convener" at the 2016 CERES InvestorSummitonClimateRisk at the UN	O Other - Provide Description
If Gift, Provide Travel Destination New York, NY	If CIA Devota Tenual Destination
Meals: \$285.00	► If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (a)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/	DATE(S):// AMT: \$
► MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Olher - Provide Description	Other - Provide Description
▶ If Gift, Provide Travel Destination	➤ If Glift, Provide Travel Destination
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
John Chlang

- · Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Agronym)
The Hunt Institute	Milken Institute
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1000 Park Forty Plaza, Sulte 280	1250 Fourth Street
CITY AND STATE	CITY AND STATE
Durham, NC 27713	Santa Monica, CA 90401
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE Education	X 501 (0)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE Economic Think Tank
DATE(S): 05 / 01 / 06 05 / 02 / 16 AMT: \$ 1126.95	DATE(S): 05 / 03 / 16 05 / 04 / 16 AMT: \$ 91.15
► MUST CHECK ONE: ☑ Gift -or- ☐ Income	► MUST CHECK ONE: 🗵 Gift -or- 🔲 Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description I participated as a Fellow in the Hunt I Kean Leadership program	Other - Provide Description Panelist at the 2016Milken Institute Global Conference
► If Gift, Provide Travel Destination NashVille, TN Airfare\$604,08 GroundTrans\$104.00Lodging\$289.47Meals\$129.40	► If Gift, Provide Travel Destination Beverly Hills, CA Meals: \$91.15
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
601 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/	DATE(S)://
MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: Gift -or- Income
Made a Speech/Participated in a Panel	Made a Speech/Particlpated in a Panel
Other - Provide Description	Other - Provide Description
▶ If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
•	
Comments:	

	ORNIA FORM 700 ITICAL PRACTICES COMMISSION
Name	
	John Chiang

. Mark either the gift or income be

- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the gift limit, but may result in a disqualifying conflict of interest.
- · For gifts of travel, provide the travel destination.

NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
NASTWesternStateTreasAssoc c/oUtahStateTreasurer	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
350 N State Street, Suite 180	
CITY AND STATE	CITY AND STATE
Salt Lake City, UT 84114	
X 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE National Association of State Treasurers	601 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 06 / 13 / 16 - 06 / 16 / 16 AMT: \$608.88	DATE(S)://
MUST CHECK ONE: X Gift -or- Income	MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description Participant-NASTTreasury MgmtTrainingSymposium	Other - Provide Description
lf Gifi, Provide Travel Destination New Orleans, LA Lodging: \$572.88; Ground Transpo: \$36,00	► If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):// AMT: \$	DATE(S)://
MUST CHECK ONE: Gift -or- Income	MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
John Chlang	

- · Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
The Aspen Institute	RFKennedy Human Rights
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
One Dupont Circle, Suite 700, NW	515 Madison Avenue
CITY AND STATE	CITY AND STATE
Washington, D.C. 20036-1133	New York, NY
∑ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE Leadership Institute	Son (c)(3) or describe business activity, if any, of source Human Rights
DATE(S): 06 / 19 / 16 06 / 20 / 16 AMT: \$ 1111.49	DATE(S): 06 / 27 / 16 / 06 / 29 / 16 AMT: \$ 2531.78
► MUST CHECK ONE: X Gift -or- Income	► MUST CHECK ONE: ☑ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
 Other - Provide Description <u>Featuredspeakerand</u> participant-AspenInstituteForumORRetirementSavings 	Other - Provide Description 2016RFK Compass Confin Hyannis Port conference participant
► If Gift, Provide Travel Destination PortlandORAirfare655.20 GrndTrans186.00Hotel203.41Meals52.81Mtgex14.07	► If Gift, Provide Travel Destination HyannisPortMA Airfare875.20 GrndTrans420.00 Lodging802.00 Meals434.58
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/	DATE(S)://
► MUST CHECK ONE: Gift -or- Income	MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
► If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name
John Chiang

- · Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ChinesePeople'sAssnforFriendshipwForeignCountries	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1 Taljichang Street	
CITY AND STATE	CITY AND STATE
Beljing 100740 China	
∑ 501 (o)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 07 / 31 / 16 - 08 / 07 / 16 AMT: \$ 6285.00	DATE(S):
► MUST CHECK ONE: 🗵 Gift -or- 🗌 Income	MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description SpeakerSino-USInternet EcosystemInnovationForumLedUSChinaTradeMission	Other - Provide Description
► If Gift, Provide Travel Destination BeljingShanxlNanjing GuangzhouChinaAirfare:4950Hotel1050Meals285	► If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):// AMT: \$	DATE(S):// AMT; \$
MUST CHECK ONE: Glft -or- Income	MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
► If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination.
Comments:	II · · · · · · · · · · · · · · · · · ·
- Commonton	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
John Chiang	

- · Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the gift limit, but may result in a disqualifying conflict of interest.
- · For gifts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
The Hunt Institute	in a constant of the second of
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1000 Park Forty Plaza, Suite 280	CITY AND STATE
Durham, NC 27713	GITTAND GIAIL
∑ 501 (o)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE Education	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 08 / 10 / 16 - 08 / 12 / 16 AMT: \$ 1531.32	DATE(S):///AMT: \$
► MUST CHECK ONE: 🗵 Gift -or- 🗌 Income	▶ MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel ,	Made a Speech/Participated in a Panel
Other - Provide Description I participated as a Fellow in the Hunt Kean Leadership Fellows Session 2	Other - Provide Description
F Gift, Provide Travel Destination Portland, OR Airfare: 207,20 Lodging: 622.22 Ground Trans: 168.17 Meals: 533.93	▶ If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(8) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):/ AMT: \$	DATE(S);//
► MUST CHECK ONE: ☐ Gift -or- ☐ Income	MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
► If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
John Chlang	

- Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization
 or the "Speech" box if you made a speech or participated in a panel. These payments are not
 subject to the gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
Western State Treasurers Assoc c/o Utah State Treas	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
350 No. State Street, Suite 180	
CITY AND STATE	CITY AND STATE
Salt Lake City, Utah 84114	
▼ 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
part of National Assoc of State Treasurers	,
DATE(S): 09 / 11 / 16 09 / 14 / 16 AMT: \$ 808.28	DATE(S);//
MUST CHECK ONE: X Gift -or- Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
O Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description Participant in the 2016 NAST Annual Conference	Other - Provide Description
lf Gift, Provide Travel Destination Seattle, WA - Lodging: \$706.53; Ground Trans: \$101.75	► If Glit, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (o)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	. 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):///	DATE(S)://
MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: ☐ Gift -ot- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
John Chlang	

- · Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
Council of Korean Americans	
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1050 Connecticut Avenue, NW #500	
CITY AND STATE	CITY AND STATE
Washington, D.C. 20036	
X 501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE Leadership	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 10 / 14 / 16 10 / 15 / 16 AMT: \$ 397.36	DATE(S):
MUST CHECK ONE: X Gift -or- Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description <u>FeaturedspeakerCouncilof</u> KoreanAmericans2ndAnnualSummitandGala	Other - Provide Description
- If Gift, Provide Travel Destination Washington, D.CLodging: \$342.36 Meal: \$55.00	► If Gift, Provide Travel Destination
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):// AMT: \$	DATE(S)://
MUST CHECK ONE: Gift -or- Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated In a Panel .	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
If Gift, Provide Travel Destination	► If Gift, Provide Travel Destination
Comments:	

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
Johr	n Chiang

- . Mark either the gift or income box.
- Mark the "501(c)(3)" box for a travel payment received from a nonprofit 501(c)(3) organization or the "Speech" box if you made a speech or participated in a panel. These payments are not subject to the gift limit, but may result in a disqualifying conflict of interest.
- For gifts of travel, provide the travel destination.

NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
The Chinese Finance Association	Hawaii Tax Institute
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
1456 South Emerald Avenue	P.O. Box 1381
CITY AND STATE	CITY AND STATE
Chicago, IL 60607	Honolulu, HI
⊠ 501 (0)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE Finance Professionals	
DATE(S): 11,04,16 - 11,06,16 AMT: \$2228.67	DATE(S): 11 / 09 / 16 11 / 10 / 16 AMT: \$ 1026.79
► MUST CHECK ONE: 🔀 Glift -or- 🗌 Income	MUST CHECK ONE: ☑ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description Lunchkeynote-TCFA 22nd Annual Conference	O Other - Provide Description PlenarySessionTaxInstitute Speaker
If Gift, Provide Travel Destination New York, NY Airfare:1647.20 GroundTrans:102.47 Lodging:329.00 Meals:105.00	► If Gift, Provide Travel Destination Honolulu, HI Airfare: 597.00 GroundTrans: 30.00 Lodging: 324.79 Meal: 75.00
► NAME OF SOURCE (Not an Acronym)	► NAME OF SOURCE (Not an Acronym)
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)
CITY AND STATE	CITY AND STATE
501 (c)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE	501 (o)(3) or DESCRIBE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S):// AMT: \$	DATE(S)://
► MUST CHECK ONE: ☐ Gift -or- ☐ Income	► MUST CHECK ONE: ☐ Gift -or- ☐ Income
Made a Speech/Participated in a Panel	Made a Speech/Participated in a Panel
Other - Provide Description	Other - Provide Description
► If Gift, Provide Travel Destination	▶ If Gift, Provide Travel Destination
Comments:	, ,